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**REQUEST
FOR
CONTINUED EXAMINATION (RCE)
TRANSMITTAL**

Address to:
Commissioner for Patents
Box RCE
Washington, DC 20231

<i>Filing Date</i>	10/12/01
<i>Application Number</i>	09/977084
<i>First Named Inventor</i>	G. Michael Uhler
<i>Group Art Unit</i>	2183
<i>Examiner Name</i>	Theresa Frederick
<i>Attorney Docket Number</i>	MIPS.0140-00-US

This is a request for continued Examination (RCE) under CFR 1.114 of the above-identified application.

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995 or to any design application. See instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. Submission required under 37 CFR 1.1114

- a. Previously submitted
 - i. Consider the amendment(s)/reply under 37 CFR 1.1116 previously filed on _____
(Any unentered amendment(s) referred to above will be entered)
 - ii. Consider the arguments in the Appeal Brief previously filed on _____
 - iii. Other _____
- b. Enclosed
 - i. Amendment
 - ii. Affidavit(s)/Declaration
 - iii. Information Disclosure Statement (IDS)
 - iv. Other _____ check for fees

2. Miscellaneous

- a. Suspension of action on the above-identified application is requested under 37 CFR 1.103C for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 VFR 1.17(i) required)
- b. Other _____

3. Fees The RCE fee under 37 CFR 1.17 (e) is required by 37 CFR 1.114 when the RCE is filed.

- a. The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. _____
 - i. RCE fee required under 37 CFR 1.17(e)
 - ii. Extension of time fee (37 CFR 1.136 and 1.17)
 - iii. Other _____
- b. Check in the amount of \$ 790 enclosed
- c. Payment by credit card (Form PTO-2038 enclosed)

WARNING: Information on this form may be public. Credit card information should not be included on the form. Provide credit card information and authorization on PTO-2038.

SIGNATURE OF APPLICANT/ATTORNEY, OR AGENT REQUIRED

Name (Print/Type)	James W. Huffman	Registration No. (Attorney/Agent)	35,549	Telephone	(719) 475-7103
Signature	<i>James W. Huffman</i>			Date	5-6-05

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as Express mail in an envelope addressed to: Commissioner for Patents, Box RCE, Washington, DC, 20231, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.

Name (Print/Type)	<i>Alicia Mierick</i>	80 004 717 383 VS
Signature	<i>Alicia Mierick</i>	Date 5/9/05